. /	TPE .	PART B	s - FEE(S)	TRAN	ISMITTAL	ı	•	
Complete and send this	4	applicable fo	ee(s), to: <u>M</u> or <u>F</u>		Mail Stop ISS Commissioner fo P.O. Box 1450 Alexandria, Virg (703) 746-4000			
INSTRUCTIONS: This cappropriate. All further considered unless corrected belomaintenance fee notifications.	should be used for tran both the including the l ow or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	JE FEE and Proders and notification of the second specifying a	UBLIC ication new co	ATION FEE (if requ of maintenance fees v rrespondence address	ired). Blocks 1 through 5 will be mailed to the curren ; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 09/08/2004					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Scott A. Horstemeyer Thomas, Kayden, Horstemeyer & Risley, L.L.P. Suite 1750 100 Galleria Parkway, N.W. Atlanta, GA 30339-5948 072272004-MABDELR3-00000142-160255. 69769591					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
					Belinda K. Weiss (Depositor's name)			
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2 F0.8001 20.00					October 19, 2004 (Date)			
APPLICATION NO.	FILING DATE	FIRST NAMED INVE		INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/769,591	01/25/2001		William	. Betts		061607-1400	4539	
TITLE OF INVENTION: EM	BEDDED SIGNAL CONS	STELLATIONS				3 00000142 09769591		
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APPLN. TYPE	SMALL ENTITY	ISSUE F		PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	3\$ ¥3\$8	ş\$1370		\$0	жжжж\$1370	12/08/2004	
EXAMIN	ART UNIT		CL	LASS-SUBCLASS				
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 Change of correspondence address or indication of "Fee Address CFR 1.363). Change of correspondence address (or Change of Correspon Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cus Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTING. 			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. [Thomas, Kayden, Horstemeyer & Risley 2 3					
					/	nee is identified below, the	document has been filed for	
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4a. The following fee(s) are end Issue Fee	closed:	40	o. Payment of I	1 ' '	ount of the fee(s) is er	nclosed		
					t card. Form PTO-2038 is attached.			
Advance Order - # of C	opies <u>10</u>		The Direct Deposit Acco	ctor is h	ereby authorized by conber 16-0255	charge the required fee(s), or (enclose an extra	r credit any overpayment, to copy of this form).	
5. Change in Entity Status (fr		,				LL ENTITY status. See 37 (
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Authorized Signature	Com M +	m		!	Date	t, 18,2004		
Typed or printed nameKaren G. Hazzah				i	Registration No. 48,472			
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